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CONFIRMATION NO. 9597

SERIAL NUMBER 10/774,982	FILING DATE 02/09/2004 RULE	CLASS 052	GROUP ART UNIT 3635	ATTORNEY DOCKET NO. KF-2004-01						
APPLICANTS Kurt J. Fredrickson, Hartford, WI; ** CONTINUING DATA ***** <i>NONE A.M.</i> ** FOREIGN APPLICATIONS ***** <i>NONE A.M.</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 05/05/2004										
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Mark D. Kelly</i> Examiner's Signature <i>A.M.</i> Initials		STATE OR COUNTRY WI	SHEETS DRAWING 9	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 5					
ADDRESS Mark D. Kelly 5401 N. Shoreland Ave. Whitefish Bay, WI 53217-5132										
TITLE Angularly adjustable post mount										
FILING FEE RECEIVED 516	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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